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Technology Center 2100

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing) <b>CUSTOMER NUMBER</b> 27832	<b>Application Number</b>	09/928,024	
	<b>Filing Date</b>	10 AUGUST 2001	
	<b>First Named Inventor</b>	ELDERING	
	<b>Group Art Unit</b>	2151	
	<b>Examiner Name</b>	UNKKNOWN	
<b>Total Number of Pages in This Submission</b>	74	<b>Attorney Docket Number</b>	T741-10

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b> Cited References. Return receipt postcard. Copy of International Search Report (PCT/US01/25261).		

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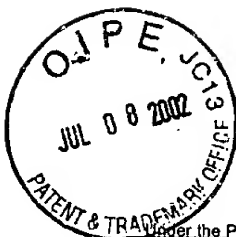
AUG 14 2002

GROUP 3600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Expanse Networks, Inc. Douglas J. Ryder, Reg. No. 43,073
Signature	
Date	7/3/02

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 7/3/02	
Typed or printed name	Laura J. Kelly
Signature	
Date	7/3/02

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PTO/SB/17 (11-00)  
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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$130.00)

## Complete if Known

Application Number 09/928,024  
Filing Date 10 AUGUST 2001  
First Named Inventor ELDERING  
Examiner Name UNKNOWN  
Group Art Unit 2151  
Attorney Docket No. T741-10

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## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 501535  
Deposit Account Name Expanse Networks, Inc.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	0.00
106 320	206 160	Design filing fee	0.00
107 490	207 245	Plant filing fee	0.00
108 710	208 355	Reissue filing fee	0.00
114 150	214 75	Provisional filing fee	0.00

SUBTOTAL (1) (\$0.00)

### 2. EXTRA CLAIM FEES

Total Claims 80 - 80\*\* = 0 x 9.00 = 0.00  
Independent Claims 5 - 5\*\* = 0 x 40.00 = 0.00  
Multiple Dependent 135.00 = 0.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$0.00)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	0.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	0.00
139 130	139 130	Non-English specification	0.00
147 2,520	147 2,520	For filing a request for ex parte reexamination	0.00
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	0.00
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	0.00
115 110	215 55	Extension for reply within first month	0.00
116 390	216 195	Extension for reply within second month	0.00
117 890	217 445	Extension for reply within third month	0.00
118 1,390	218 695	Extension for reply within fourth month	0.00
128 1,890	228 945	Extension for reply within fifth month	0.00
119 310	219 155	Notice of Appeal	0.00
120 310	220 155	Filing a brief in support of an appeal	0.00
121 270	221 135	Request for oral hearing	0.00
138 1,510	138 1,510	Petition to institute a public use proceeding	0.00
140 110	240 55	Petition to revive - unavoidable	0.00
141 1,240	241 620	Petition to revive - unintentional	0.00
142 1,240	242 620	Utility issue fee (or reissue)	0.00
143 440	243 220	Design issue fee	0.00
144 600	244 300	Plant issue fee	0.00
122 130	122 130	Petitions to the Commissioner	130.00
123 50	123 50	Processing fee under 37 CFR 1.17(q)	0.00
126 180	126 180	Submission of Information Disclosure Stmt	0.00
581 40	581 40	Recording each patent assignment per property (times number of properties)	0.00
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
179 710	279 355	Request for Continued Examination (RCE)	0.00
169 900	169 900	Request for expedited examination of a design application	0.00
Other fee (specify)			0.00

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$130.00)

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GROUP 8600

## SUBMITTED BY

Name (Print/Type)	Douglas J. Ryden	Registration No. (Attorney/Agent)	43,073	Telephone	(215) 348-0265
Signature		Date	7/3/02		

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